

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>hw</i>	<i>68904</i>	<i>7/14/00</i>
O.I.P.E. CLASSIFIER		<i>49</i>	<i>7/19/00</i>
FORMALITY REVIEW	<i>DMK</i>	<i>69169</i>	<i>9/2/00</i>
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 + ..... Restricted  
 N ..... Non-  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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